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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO	
09/810,865	03/16/2001	Stephen J. Brown	HERO-1-1112	HERO-1-1112 6556	
32042	7590 05/03/2006		EXAMINER		
PATTON BOGGS LLP			PHAN, THAI Q		
8484 WESTPA	ARK DRIVE				
SUITE 900			ART UNIT	PAPER NUMBER	
MCLEAN, VA 22102			2128		
			DATE MAII ED: 05/02/2004	,	

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)	
Intonvious Summans	09/810,865	BROWN, STEPH	IEN J.
Interview Summary	Examiner	Art Unit	
	Thai Phan	2128	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>Thai Phan</u> .	(3)		
(2) Mr. Martin Sulsky, applicant's representative.	(4)		
Date of Interview: 26 April 2006.			
Type: a)☐ Telephonic b)☐ Video Conference c)☑ Personal [copy given to: 1)☐ applicant 2	2)⊠ applicant's representativ	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: 37.			
Identification of prior art discussed: Kehr, US patent no. 5,6	<u>642,731</u> .		
Agreement with respect to the claims f) was reached. g)⊠ was not reached. h)☐ N	N/A.	
Substance of Interview including description of the general reached, or any other comments: discussed "scaling factor selfcare actions. Applicant's representative also discussed These features will be consided in the next action. (A fuller description, if necessary, and a copy of the amendallowable, if available, must be attached. Also, where no consideration and the second selection of the general reached also discussed the second selection.	" as applied to a specific cont I the claimed electronic device ments which the examiner agony of the amendments that we	rol function for a per with patient's ca	particular rd data. er the claims
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTE requirements on reverse side or on attached sheet.	CTION MUST INCLUDE THE last Office action has already OF ONE MONTH OR THIRT ERVIEW SUMMARY FORM,	been filed, APPLY DAYS FROM T WHICHEVER IS	LICANT IS THIS
Examiner Note: You must sign this form unless it is an	marka	^	
Attachment to a signed Office action.	Examiner's sign	nature, if required	